



April 21, 2018 Bronx, NY



## Registration Instructions/Coversheet

1. Complete the [online registration for Home In A Day](#)
2. Submit:
  - a. Completed and signed [Intake Form packet](#) (4 pages)
  - b. 2 most current paystubs for all household adults
  - c. 2 most current Profit & Loss statements (if self-employed)
  - d. 1 month documentation of benefits, pension, child support, etc. (if applicable)

Submit all documents by Monday, April 16th via fax or e-mail.

You may use this page as your coversheet.

**Fax** 203.989.0403      **E-mail** [FTHB@hdfconnects.org](mailto:FTHB@hdfconnects.org)

Questions: 203-969-1830 x2003



April 21, 2018 Bronx, NY

How did you hear about this event: HDF Invitation   
 HDF Website  Loan Officer  Realtor  Family/Friend  Counseling agency  Other

**APPLICANT CONTACT & HOUSING INFORMATION**

Last Name	First Name	M I	Today's Date
Street Address			Apartment/Unit #
City	State	ZIP	Phone
E-mail Address			

**DO YOU PAY RENT?** NO  I live with family/friends  Other  YES  Monthly Cost \$ \_\_\_\_\_ How long have you lived in this unit? \_\_\_\_\_ Do you receive a rent subsidy or rent stipend? YES  NO

**WOULD YOU CONSIDER YOUR HOME TO BE IN AN URBAN AREA  OR A RURAL AREA**

**BIRTH DATE:** \_\_\_\_\_ **AGE:** \_\_\_\_\_ **GENDER:** \_\_\_\_\_ **FIRST TIME HOME BUYER? YES  NO**

Active Military? YES  NO  Please answer both: **Race:** White  Black  Asian  Native Hawaiian  American Indian   
 Veteran? YES  NO  Multi-race  **Ethnicity:** Not Hispanic  Hispanic

Are you a citizen of the United States? YES  NO  If not, do you have a Green Card? YES  NO  Preferred Language: ENGLISH   
 YES  NO  Country of Origin: \_\_\_\_\_ SPANISH  PORTUGUESE  CREOLE   
 OTHER  \_\_\_\_\_

**HOUSEHOLD INFORMATION** Are you: single  married  divorced  separated  widowed

Total # of people in your household \_\_\_\_\_ # of Children under 18 years old \_\_\_\_\_

**Choose best household description:** Single Adult (over 18)  2 or more related adults   
 Female-headed single parent household  Male-headed single parent household   
 Married with children  Married without children  2 or more unrelated adults (domestic partnership)

**EDUCATION DID YOU OBTAIN A DIPLOMA/GED FROM HIGH SCHOOL OR VOCATIONAL/ TRADE SCHOOL YES  NO**

Did you attend College: YES  NO  Have you earned an: Associates Degree  Bachelor's Degree   
 Master's Degree  PhD  OTHER SPECIALIZED TRAINING \_\_\_\_\_

**YOUR EMPLOYMENT & INCOME**

Your Employer:	Starting date:	Full time YES <input type="checkbox"/> NO <input type="checkbox"/>
Job/Position Title	Town or City where you work:	
2nd job Employer	Starting date:	Full time YES <input type="checkbox"/> NO <input type="checkbox"/>
Job/Position Title	Town or City where you work:	
YOUR TOTAL GROSS MONTHLY INCOME \$ before taxes	YOUR TOTAL NET MONTHLY INCOME \$ after deductions	



**CO-APPLICANT**

BIRTH DATE:	AGE:	GENDER:	FIRST TIME HOME BUYER? YES <input type="checkbox"/> NO <input type="checkbox"/>
-------------	------	---------	---

Active Military? YES <input type="checkbox"/> NO <input type="checkbox"/>	Please answer both: <b>Race:</b> White <input type="checkbox"/> Black <input type="checkbox"/> Asian <input type="checkbox"/> Native Hawaiian <input type="checkbox"/> American Indian <input type="checkbox"/> Multi-race <input type="checkbox"/>		
	<b>Ethnicity:</b> Not Hispanic <input type="checkbox"/> Hispanic <input type="checkbox"/>		
Are you a citizen of the United States? YES <input type="checkbox"/> NO <input type="checkbox"/>	If not, do you have a Green Card? YES <input type="checkbox"/> NO <input type="checkbox"/>	Preferred Language: ENGLISH <input type="checkbox"/> SPANISH <input type="checkbox"/>	
	Country of Origin: _____	PORTUGUESE <input type="checkbox"/> CREOLE <input type="checkbox"/> OTHER <input type="checkbox"/>	

**EDUCATION DID YOU OBTAIN A DIPLOMA/GED FROM HIGH SCHOOL OR VOCATIONAL/ TRADE SCHOOL YES  NO**

Did you attend College: YES  NO  Have you earned an: Associates Degree  Bachelor's Degree   
 Master's Degree  PhD  OTHER SPECIALIZED TRAINING \_\_\_\_\_

**EMPLOYMENT & INCOME**

Your Employer:	Starting date:	Full time YES <input type="checkbox"/> NO <input type="checkbox"/>
Job/Position Title	Town or City where you work:	
2nd job Employer	Starting date:	Full time YES <input type="checkbox"/> NO <input type="checkbox"/>
Job/Position Title	Town or City where you work:	

YOUR TOTAL GROSS MONTHLY INCOME \$ before taxes	YOUR TOTAL NET MONTHLY INCOME \$ after deductions
--	--

**HOUSEHOLD INCOME Please PROVIDE THE monthly income for OTHER PEOPLE over 18 who will live in the new home**

Person # 1 relationship to you \_\_\_\_\_ co-applicant on loan YES  NO

TOTAL **GROSS** MONTHLY INCOME before taxes \$ \_\_\_\_\_ TOTAL **NET** MONTHLY INCOME after deductions \$ \_\_\_\_\_

Person # 2 relationship to you \_\_\_\_\_ co-applicant on loan YES  NO

TOTAL **GROSS** MONTHLY INCOME before taxes \$ \_\_\_\_\_ TOTAL **NET** MONTHLY INCOME after deductions \$ \_\_\_\_\_

*I hereby certify that the information in this application is true and complete.*

\_\_\_\_\_  
Signature of Applicant                                      Date                                      Signature of Co-applicant or Co-purchaser                                      Date



# HDF CREDIT RELEASE FORM

Please **TYPE** the information, **PRINT** out, and **sign** completed form. Otherwise, print application and **handwrite** clearly. Once completed, upload to your online account.

**Print Form**

**Housing  
Development  
Fund**

*I/We authorize representatives of the Housing Development Fund to order my credit report.  
By signing below, I/we authorize the Housing Development Fund to run a credit check when necessary, and to release all information to interested parties upon their request. I (we) understand that this report will be ordered through HDF and that it will appear as an inquiry on my (our) report.*

Signature of Applicant

Date

Signature of Co-applicant or Co-purchaser

Date

Print Name of Applicant

Print Name of Co-applicant or Co-purchaser

Social Security Number of Applicant  
(e.g. XXX-XX-XXXX)

Date of Birth of Applicant  
(e.g. XX-XX-XXXX)

Social Security Number of Co-Applicant  
(e.g. XXX-XX-XXXX)

Date of Birth of Co-Applicant  
(e.g. XX-XX-XXXX)

Current Address:

City:

State:

Zip:

Previous Address:

City:

State:

Zip:

Do you have a security freeze on your credit report?  Yes  No

If Yes, which bureau(s)?  Experian  Transunion  Equifax

HDF must order a 3 bureau report. You will have to contact the credit bureau to give HDF access.

Please let us know when and how we can access. HDF will not move forward with your application until we can obtain required credit report.

## AUTHORIZATION FOR INFORMATION SHARING

*I/We, authorize the Housing Development Fund, Inc. to:*

- a) *Share readiness and eligibility information with an HDF lending partner employee, if in fact they referred me/us to HDF for homeownership counseling services.*
- b) *Share all information contained in my/our loan application, including financial information, credit history, and any third party information obtained for the counseling or mortgage application. This information may be used by any of HDF's lending partners to assist me/us in qualifying for a mortgage. I/We understand that the lender, not HDF, will determine if I/we qualify for a mortgage based on this referral.*
- c) *Obtain a copy of the Closing Disclosure, Appraisal, and Real Estate Note(s) when I purchase a home, from the lender who made me/us the loan and/or the title company and/or attorney that closed the loan.*
- d) *I/We authorize our first mortgage lender and/or attorney to provide a hard or electronic copy of the Sales Contract, Application (1003), Transmittal Summary (1008), Loan Estimate, CD, Appraisal, Commitment Letter, and other documentation required in connection with the processing of my loan either prior to or post- closing on the purchased home.*

Signature of Applicant

Date

Signature of Co-applicant or Co-purchaser

Date

Print Name of Applicant

Print Name of Co-applicant or Co-purchaser





# HDF DISCLOSURE AND AUTHORIZATION FORM

Please **TYPE** in fields, **PRINT** out, and **sign** completed application, if possible. Otherwise, print application and **handwrite** clearly. Once completed, Upload to your online account.

[Print Form](#)

**Housing  
Development  
Fund**

**I/We, the undersigned, understand, certify and authorize the following:**

- The Housing Development Fund (HDF) provides HUD approved pre-purchase counseling; pre-purchase education; non-delinquency post purchase workshops and landlord training as rental education for first time homebuyers. In this capacity HDF's primary responsibility is to the applicants for such services.

**PLEASE READ AND THEN CHECK EACH STATEMENT TO ACKNOWLEDGE UNDERTANDING AND AGREEMENT.**

- I/We, am/are applying to the Housing Development Fund's First Time Homebuyer Program for HUD approved services.
- I/We agreed to complete the intake process and have provided all required information and documents pertaining to identification, household composition, employment, earned and unearned income, income taxes, assets and liabilities. I/We have also signed a credit release document and paid to have HDF access my credit report.
- I/We certify that all of the information is true and complete. I/We made no misrepresentation in the application or other documents, nor did I/we omit any pertinent information. I/We agree that HDF reserves the right to verify any information provided.
- I/We understand that once this information is given to HDF a request to change any information must be in writing. I/We understand if that if that change impacts program eligibility (e.g. income, family size, etc.) my/our application will become inactive for 6 months; at which time I/we can begin the process again.
- I/We can expect an HDF counselor/advisor to use the information provided to assess for mortgage readiness; provide individual counseling and determine program eligibility for available Local Non-Profit; Municipal; State or Federal first time homebuyer programs.
- I/We certify that I/We do not currently own a home and that in the past 7 years there has not been a foreclosure, a transfer of title or a deed in lieu transaction involving a loan or mortgage on which I/We were obligated.
- I/We understand that HDF receives funding through HUD, Housing Partnership Network, NeighborWorks America, CT Department of Housing and the Connecticut Housing Finance Authority (CHFA); HDF is required to include our data in its client management systems and maintain specific client files and make those available to HUD; HPN; CT DOH; NW Project Reinvest and CHFA for the purposes of oversight, compliance and evaluation. I/we agree that this data can be submitted and those files can be opened and reviewed.
- I/We understand that within the organization, access to nonpublic personal information is restricted to those employees who provide service or do reporting. HDF maintains physical, electronic and procedural safeguards that comply with federal regulations to guard mine/our nonpublic personal information.
- Furthermore, I/we, the undersigned, acknowledge the following: in addition to being a HUD Approved HOUSING COUNSELING AGENCY HDF is also a Lender. HDF provides financing to private and not-for profit developers of affordable housing, first time homebuyers, and homebuyers eligible under specialized programs. HDF and HDF Community Works are periodically the owners of record of properties for sale in its service areas.
- I/We understand if we choose to apply for HDF lending programs a separate application and process is in place. Eligibility for HDF loan products is not guaranteed. Eligibility for purchases of specific affordable units is not guaranteed.
- I/We, the undersigned, certify our understanding of all of the above, and authorize HDF to continue to process our application as described above.**

_____ <b>Signature of Applicant</b>	_____ <b>Date</b>	_____ <b>Signature of Co-applicant or Co-purchaser</b>	_____ <b>Date</b>
_____ <b>Print Name of Applicant</b>	_____ <b>Print Name of Co-applicant or Co-purchaser</b>		

